

County: Lincoln  
 RIVERVIEW REHABILITATION/CARE CENTER  
 428 NORTH 6TH STREET

Facility ID: 7700

Page 1

TOMAHAWK 54487 Phone:(715) 453-2511  
 Operated from 1/1 To 12/31 Days of Operation: 365  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/02): 59  
 Total Licensed Bed Capacity (12/31/02): 64  
 Number of Residents on 12/31/02: 54

Ownership: Corporation  
 Highest Level License: Skilled  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 57

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)			%
			Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No						1 - 4 Years			42.6
Supp. Home Care-Personal Care	No						More Than 4 Years			37.0
Supp. Home Care-Household Services	No		Developmental Disabilities	0.0	Under 65	1.9				20.4
Day Services	No		Mental Illness (Org./Psy)	35.2	65 - 74	11.1				-----
Respite Care	Yes		Mental Illness (Other)	5.6	75 - 84	22.2				100.0
Adult Day Care	Yes		Alcohol & Other Drug Abuse	0.0	85 - 94	57.4	*****			
Adult Day Health Care	No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	7.4	Full-Time Equivalent			
Congregate Meals	No		Cancer	1.9		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No		Fractures	11.1		100.0	(12/31/02)			
Other Meals	No		Cardiovascular	20.4	65 & Over	98.1	-----			
Transportation	No		Cerebrovascular	11.1		-----	RNs			11.8
Referral Service	No		Diabetes	5.6	Sex	%	LPNs			6.3
Other Services	Yes		Respiratory	1.9	-----	-----	Nursing Assistants,			
Provide Day Programming for			Other Medical Conditions	7.4	Male	37.0	Aides, & Orderlies			
Mentally Ill	No			-----	Female	63.0				
Provide Day Programming for				100.0		-----				
Developmentally Disabled	No					100.0				

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#### Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care		
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)
Int. Skilled Care	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Skilled Care	7	100.0	348	36	90.0	102	0	0.0	0	4	57.1	166	0	0.0	0	0	0.0	0	47	87.0
Intermediate	---	---	---	4	10.0	86	0	0.0	0	3	42.9	166	0	0.0	0	0	0.0	0	7	13.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	7	100.0		40	100.0		0	0.0		7	100.0		0	0.0		0	0.0		54	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02							
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Percent Admissions from:		Activities of		% Needing		% Totally		Total	
		Daily Living (ADL)		Assistance of		Dependent		Number of	
				One Or Two Staff				Residents	
Private Home/No Home Health	18.8	Bathing	1.9	88.9	9.3	54			
Private Home/With Home Health	0.0	Dressing	20.4	72.2	7.4	54			
Other Nursing Homes	7.2	Transferring	31.5	61.1	7.4	54			
Acute Care Hospitals	73.9	Toilet Use	22.2	66.7	11.1	54			
Psych. Hosp.-MR/DD Facilities	0.0	Eating	74.1	24.1	1.9	54			
Rehabilitation Hospitals	0.0	*****							
Other Locations	0.0								
Total Number of Admissions	69	Continence	% Special Treatments		%				
Percent Discharges To:		Indwelling Or External Catheter	9.3	Receiving Respiratory Care	9.3				
Private Home/No Home Health	22.5	Occ/Freq. Incontinent of Bladder	53.7	Receiving Tracheostomy Care	0.0				
Private Home/With Home Health	25.4	Occ/Freq. Incontinent of Bowel	31.5	Receiving Suctioning	0.0				
Other Nursing Homes	5.6			Receiving Ostomy Care	0.0				
Acute Care Hospitals	11.3	Mobility		Receiving Tube Feeding	0.0				
Psych. Hosp.-MR/DD Facilities	1.4	Physically Restrained	0.0	Receiving Mechanically Altered Diets	40.7				
Rehabilitation Hospitals	0.0								
Other Locations	5.6	Skin Care		Other Resident Characteristics					
Deaths	28.2	With Pressure Sores	1.9	Have Advance Directives	92.6				
Total Number of Discharges		With Rashes	3.7	Medications					
(Including Deaths)	71			Receiving Psychoactive Drugs	70.4				

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Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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		This Facility	Ownership: Proprietary		Bed Size: 50-99		Licensure: Skilled		All Facilities
		%	%	Ratio	%	Ratio	%	Ratio	% Ratio
Occupancy Rate: Average Daily Census/Licensed Beds		89.1	80.0	1.11	83.5	1.07	83.3	1.07	85.1 1.05
Current Residents from In-County		53.7	73.3	0.73	72.9	0.74	75.8	0.71	76.6 0.70
Admissions from In-County, Still Residing		17.4	19.2	0.91	22.2	0.78	22.0	0.79	20.3 0.86
Admissions/Average Daily Census		121.1	136.0	0.89	110.2	1.10	118.1	1.03	133.4 0.91
Discharges/Average Daily Census		124.6	138.5	0.90	112.5	1.11	120.6	1.03	135.3 0.92
Discharges To Private Residence/Average Daily Census		59.6	59.1	1.01	44.5	1.34	49.9	1.20	56.6 1.05
Residents Receiving Skilled Care		87.0	93.4	0.93	93.5	0.93	93.5	0.93	86.3 1.01
Residents Aged 65 and Older		98.1	95.9	1.02	93.5	1.05	93.8	1.05	87.7 1.12
Title 19 (Medicaid) Funded Residents		74.1	73.2	1.01	67.1	1.10	70.5	1.05	67.5 1.10
Private Pay Funded Residents		13.0	16.8	0.77	21.5	0.60	19.3	0.67	21.0 0.62
Developmentally Disabled Residents		0.0	0.9	0.00	0.7	0.00	0.7	0.00	7.1 0.00
Mentally Ill Residents		40.7	33.7	1.21	39.0	1.05	37.7	1.08	33.3 1.22
General Medical Service Residents		7.4	19.3	0.38	17.6	0.42	18.1	0.41	20.5 0.36
Impaired ADL (Mean)		39.3	46.1	0.85	46.9	0.84	47.5	0.83	49.3 0.80
Psychological Problems		70.4	51.2	1.37	54.6	1.29	52.9	1.33	54.0 1.30
Nursing Care Required (Mean)		6.9	7.2	0.97	6.8	1.03	6.8	1.02	7.2 0.96